Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 2018

Do not enter social security numbers on this form as it may be made public

Department of the Treasury Internal Revenue Service ▶ Go to www.irs gov/Form990 for instructions and the latest information Open to Public Inspection

<u>A .</u>	or in	e 2018 calendar year, or tax year beginning , 2018, a	nd ending		, 20			
В,	Check if a	C Name of organization		D Employer ide	ntification number			
_	_	ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC		81-062	3035			
	nboA							
L	Name	Rehange Number and street (or P.O. box if mail is not delivered to street address)	loom/suite	E Telephone number				
L	Inria	return 224 WEST 57TH STREET		(212) 54	8-0600			
	Final Termi	ceturn City or town, state or province, country, and ZIP or foreign postal code	-					
	Amer			G Gross receipt	11,33	5,406.		
		E Name and address of noncinal officer PATRICK CASPARD		H(a) Is this a gro subordinates		X No		
		224 WEST 57TH STREET, NEW YORK, NY 10019	^	H(b) Are all subare		s No		
	Tax-ex	empt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or	527	D if "No, 'at	tach a list (see instruction	ns)		
J	Websi	te ▶ N/A		H(c) Group exem	plion number			
K	Form	of organization X Corporation Trust Association Other	L Year of form	nation 2003 M	State of legal domicile	∍ DE		
P	art I	Summary		·····				
	1	Briefly describe the organization's mission or most significant activities TO TRAN	SFORM CLC	SED SOCIET	IES INTO OP	EN		
ė		SOCIETIES AND TO PROTECT AND EXPAND THE VALUES OF	EXISTING	OPEN				
Governance		SOCIETIES.	1000					
/eri	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed	of more than 25	% of its net asset	s			
ő	3	Number of voting members of the governing body (Part VI, line 1a)			3	7.		
مخ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	4.		
ţ	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			5	0.		
Activities &	6	Total number of valuations (set and 6 accounts)			6	111.		
Ą	7a	Total unrelated business revenue from Part VIII, column (C), ine 12			7a	0.		
	b	Net unrelated business taxable income from Form 990-T, InRECEIVED			7b			
			וטר	Prior Year	Current	Year		
٠.	8	Contributions and grants (Part VIII, line 1h)		7,528,38	8. 7,718	3,425.		
ě	9	Program service revenue (Part VIII, line 1h)			0. 20	0,985.		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d).	<u> </u>	754,95	0. 95	2,211.		
œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 OGDEN. UT		6,66		9,698.		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,290,00		1,319.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,045,50		0,509.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.		
LD.	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).		2,560,12	8. 2,243	3,343.		
xpenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		•••••	0.	0.		
g		Total fundraising expenses (Part IX, column (D), line 25) ▶ 565, 989.						
ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,289,77	6. 78:	5,657.		
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		9,895,40	9. 7,499	9,509.		
	19	Revenue less expenses Subtract line 18 from line 12		-1,605,40		1,810.		
d Balances				inning of Current				
land	20	Total assets (Part X, line 16)		31,049,71	0. 28,682	2,572.		
Ass	21	Total liabilities (Part X, line 26)		6,236,92	2. 4,22	2,623.		
F.E.	22	Net assets or fund balances Subtract line 21 from line 20,		24,812,78				
Pa	rt II	Signature Block						
		nallies of perjury, I declare that I have examined this return, including accompanying schedule			my knowledge and	belief, it is		
Ine	e, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which	preparer has any	knowledge				
_		In Mann Jarke		11	-4-19			
Sig		Signature of officer		Date				
He	re	■ MAIJA ARBOLINO TREASURE	ER					
		Type or print name and little						
		Print/Type preparer's name Preparer's signature	Date	Check	if PTIN			
Paic		MARGARET A BRADSHAW, CPA Masquet a. Brocklaw	 1 1/14/19	self-employ	ed P005012	22		
	parer	Firm's name KPMG LLP	J		3-5565207			
Use	Only	Firm's address >8350 BROAD STREET MCLEAN, VA 22102			703)2868000			
Ma	y the	IRS discuss this return with the preparer shown above? (see instructions)			X Yes	No		
	Pana	rwork Beduction Act Notice and the congrete instructions	· · · · · · · · · · · · · · · · · · ·		- Of	10,100		

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For	rm 990 (2018)	Page 2
P	art III Statement of Program Service Accomplishments	
_	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission ATTACHMENT 1	
	ATTACHMENT I	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ? Yes	X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?Yes	X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as me	
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported	to otners,
	the total expenses, and revenue, if any, for each program service reported	
42	a (Code) (Expenses \$ 5,894,235 including grants of \$ 3,775,509) (Revenue \$ 20,985	
40	ATTACHMENT 2	_'
	ATTACHIDAT 2	
	O (Code (Cod	_)
	MIDDLE EAST RULE OF LAW : THE PROGRAM AIMS TO CREATE A CRITICAL MASS OF INTERNATIONALLY-ORIENTED, REFORM-MINDED PROFESSIONALS WHO	· · · · · · · · · · · · · · · · · · ·
	ARE PREDISPOSED TO THE RULE OF LAW, COMMITTED TO A PEACEFUL	
	RESOLUTION OF THE PALESTINIAN-ISRAELI CONFLICT, AND ACTIVELY	
	ENGAGED IN BUILDING A RULE OF LAW INFRASTRUCTURE, A DEMOCRATIC	
	CIVIL SOCIETY, A STRONG LEGAL EDUCATION SYSTEM, AND TRANSPARENT	
	GOVERNMENTAL INSTITUTIONS IN PALESTINE.	
4c	: (Code) (Expenses \$427,644_ including grants of \$263,907) (Revenue \$	_)
	SOUTH AFRICA CONSTITUTIONALISM FUND: WAS ESTABLISHED TO PROMOTE	
	AND ADVANCE CONSTITUTIONALISM IN SOUTH AFRICA, GIVEN THE VITAL	
	ROLE OF CIVIL SOCIETY TO DATE IN THE BUILDING OF A SOCIETY	
	PREMISED ON HUMAN DIGNITY AND NON-DISCRIMINATION, THE ACHIEVEMENT	
	OF SUBSTANTIVE EQUALITY, AND THE ADVANCEMENT OF HUMAN RIGHTS AND	
	FREEDOMS.	
		· .
		
4d	Other program services (Describe in Schedule O) ATTACHMENT 3	
	(Expenses \$ 11,811 including grants of \$)(Revenue \$)	
	• Total program service expenses ► 6,764,783.	
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Form 990 (2018)

	V Checklist of Required Schedules		Yes	T
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			1
	complete Schedule A	1	Х	l
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			1
	candidates for public office? If "Yes," complete Schedule C, Part I	3		ı
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			1
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		l
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			1
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		l
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			t
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			l
	"Yes," complete Schedule D, Part I	6		l
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		t
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		l
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	<u> </u>		t
•	complete Schedule D, Part III	8		l
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	<u> </u>	*******	i
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			I
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		I
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	-		t
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		l
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		1
٠.	VII, VIII, IX, or X as applicable			l
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			ŀ
a	complete Schedule D, Part VI	11a		l
h		1 I a		┨
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	446		l
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		$\frac{1}{1}$
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	44.		l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			l
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	1
40	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	İ
	Schedule D, Parts XI and XII.	12a	Х	1
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If			I
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		ļ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		ļ
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		ļ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			l
	fundraising, business, investment, and program service activities outside the United States, or aggregate			l
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	4
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			l
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			I
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		4
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			1
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		ļ
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		J
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		J
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			Ī
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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Par	Checklist of Required Schedules (continued)		V	N.
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	ļ		
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25a	24a	<u></u>	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		i	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	<u> </u>		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
_	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		х
		204		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	206		Х
_	Schedule L, Part IV	28b		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	00-		х
00	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	├	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	• • •	<u></u> .	. \Box
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
_	reportable gaming (gambling) winnings to prize winners?	1c	x	
			990	(2018)

Pår	Statements Regarding Other IRS Filings and Tax Compliance (continued)			<u> </u>
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0.		1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)]
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			3.5
	solicit any contributions that were not tax deductible as charitable contributions?	6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ا ا		
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			. [
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		-	- X
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		х
	required to file Form 8282?	70		
		- 7е	-	X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			, !
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			i
11	Section 501(c)(12) organizations. Enter	.		
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	. !
	against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	{		.
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
_	Note. See the instructions for additional information the organization must report on Schedule O			1 1
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			i
_	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O · · · · ·	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
. •	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N		_	I
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O			
		Form	990	(2018)

Sect	ion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 7			
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela	ationship with			
_	any other officer, director, trustee, or key employee?		2		x
3	Did the organization delegate control over management duties customarily performed by or un				
_	supervision of officers, directors, or trustees, or key employees to a management company or othe		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's a		5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to ele				
	one or more members of the governing body?		7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval to				
	stockholders, or persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions under				
	the year by the following	_			
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	<u>x</u>	L
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Inte	rnal Revenue	Code		I
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of s	such chapters,			
,	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu	rposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fil	ing the form?.	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		· _	v -	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	<u>X</u>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests the	_		v	
	rise to conflicts?		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the po-	•	40-	х	
	describe in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13 14	X	
14	Did the organization have a written document retention and destruction policy?		14		
15	Did the process for determining compensation of the following persons include a review and				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation		15a		x
a	The organization's CEO, Executive Director, or top management official		15b		X
b	Other officers or key employees of the organization		130		
160	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar	· orrangement			
ıoa		•	16a	-	X
ь	with a taxable entity during the year?		,		
D	participation in joint venture arrangements under applicable federal tax law, and take steps to				
	organization's exempt status with respect to such arrangements?		16b	_	
Secti	on C. Disclosure				<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶ MD, NY,				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable),	990 and 990-T	(Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that applicable,		,560		J 1(0)
	Own website Another's website X Upon request Other (explain in Sch				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents	s conflict of inte	erest	ممارده	, and
. •	financial statements available to the public during the tax year	c, coc. or int		, ,,,,,,	,, 4110
20	· · · · · · · · · · · · · · · · · · ·	ooks and record	s Þ		
	State the name, address, and telephone number of the person who possesses the organization's b MAIJA ARBOLINO 224 WEST 57TH STREET NEW YORK, NY 10019				
			Form	990	(2018

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Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization n	or any related	orga	nıza	tion	CO	mpen	sate	ed any current offic	er, director, or trus	stee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individu	unle er an	Pos ot check unless per and a c Officer		is both	an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)MAIJA ARBOLINO	2.00									
DIRECTOR/TREASURER	38.00	х		х		İ		0.	350,577.	108,180.
(2)DEBORAH FINE	10.00									
DIRECTOR/SECRETARY	30.00	х		Х				0.	251,098.	57,858.
(3)PATRICK GASPARD	2.00									
DIRECTOR/PRESIDENT	38.00	х		x				0.	797,526.	142,093.
(4)WILLIAM F. WENDLER, II	2.00									
DIRECTOR	0.	x	İ					0.	0.	533
(5)WILLIAM C. CLARKE, III	2.00			-			******	***************************************		
DIRECTOR	0.	X						0.	0.	533
(6)EDDIE C. BROWN	2.00									
DIRECTOR	0.	Х					ŀ	0.	0.	533
(7)ALEXANDER SOROS	1.00									
DIRECTOR	8.04	х						0.	0.	3,116
(8)DIANA MORRIS	36.00									
PROGRAM DIRECTOR	4.00					Х		223,688.	24,854.	81,319
(9)LORNA (TRACY) BROWN	39.00									
ASSOCIATE PROGRAM DIRECTOR	1.00					х		139,185.	0.	64,061.
(10)KAREN WEBBER	40.00									
DIVISION DIRECTOR	0.	1				х		143,429.	0.	65,515
(11) PAMELA KING	40.00									
DIVISION DIRECTOR	0.	1				х		133,354.	0.	63,619
(12)SCOTT NOLEN	40.00									
TEAM MANAGER	0.]				Х		125,428.	0.	57,590.
(13)CHRISTOPHER E. STONE	0.			1		· · · · · · · · · · · · · · · · · · ·				
FORMER PRESIDENT/DIRECTOR	0.	1					х	0.	1,008,299.	0
(14)										

Form **990** (2018)

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≥age	Ç

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	plo	ye	es,	and F	ligl	nest Compensat	ed Employees	(continued)
(A) Name and title	(B) Average hours per week (list any hours for	box,	unle: er and	Pos heck ss pe	rson Irect	e than o is both or/truste	an ee)	(D) Reportable compensation from the	(E) Reportable compensation froi related organizations	other compensation
•	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC) from the organization and related organizations
										,
	<u> </u>						•			
	<u> </u>							_		
										
	1									
										
	<u></u>									
1b Sub-total	ection A				 		▶ ▶ ▶	765,084. 0. 765,084.	2,432,354 0 2,432,354	. 0.
2 Total number of individuals (including but not reportable compensation from the organization	limited to t		liste				re	ceived more than	\$100,000 of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										Yes No
4 For any individual listed on line 1a, is the organization and related organizations grandvidual	eater than	\$15	0,0	00?	l If	"Yes	," (complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y										5 X
Complete this table for your five highest compensation from the organization Report of year.										
(A) Name and business ad	dress							(B) Description of se	rvices	(C) Compensation
NONE							-			
							F			
2. Total number of independent contractors //	noludina bi	ıt ne	· 1		٠	than		stad above\ wh-	rasawad	
2 Total number of independent contractors (i more than \$100,000 in compensation from the JSA				шес	0		e II	sieu above) wno	received	Form 990 (2018)
8E1055 1 000 39433G 720F		V	18	-7.	5 F			2260829		rum ээ0 (2018)

	990 (2			OR OPEN SOC	IETY INTERNAT	CIONAL, INC.	81-0623	035 Page 9
Pạ	rť VII				- 1			
		Check if Schedule O co	ontains a respor	nse or note to ar	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, and similar amounts not included Noncash contributions included	1b 1c 1d 1d 1d 1e grants, d above 1f 1	5,683,952 2,034,473 214,619	,			
	h h	Total. Add lines 1a-1f	· · · · · · · · · ·	Business Code	7,718,425			
Program Service Revenue	2a b c	SPEAKER SERIES		900099	20,985	20,985		
E	d			·· ·· ··				
ogra	f	All other program service rev	venue					
<u>_</u>	g	Total. Add lines 2a-2f			20,985			
	3 4 5	Investment income (income dand other similar amounts). Income from investment of Royalties	tax-exempt bond	▶ proceeds .▶	1,037,666			1,037,666
	6a b	Gross rents	(ı) Real	(II) Personal				
	d 7a	Net rental income or (loss). Gross amount from sales of	(ı) Securities	(II) Other	0			!
	b	assets other than inventory Less cost or other basis and sales expenses Gain or (loss)						
	d	Net gain or (loss)			-85,455			-85,455
Other Revenue		Gross income from fundra events (not including \$ of contributions reported on See Part IV, line 18 Less direct expenses	line 1c) a				,	
J	С	Net income or (loss) from fu			0			
	9a	Gross income from gaming See Part IV, line 19		0				1
	ь	Less direct expenses			0			1
	10a	Net income or (loss) from g Gross sales of inventor returns and allowances	ory, less	▶	0			
	b c	Less cost of goods sold Net income or (loss) from sa	b	0 ▶	0			
		Miscellaneous Revenu	ie	Business Code	-			
	11a	GAINS ON FOREX		900099	232,122			232,122
	b	TAX OVERPAYMENT REFUND		900099	14,391	` '	-	14,391
	С	REFUND FROM VENDOR		900099	3,185			3,185
	d	All other revenue			212 525			
	е 12	Total Add lines 11a-11d .			249,698 8,941,319	20,985		1,201,909
	ابد	Total revenue See instruction	#11 3 	📂	0,341,313	20,365		Form 990 (2018)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a respo				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,034,760.	3,034,760.		
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,171,842.	1,171,842		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	263,907.	263,907.		
4	Benefits paid to or for members	0.			I
5	Compensation of current officers, directors, trustees, and key employees	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	1,811,893.	1,352,434.	45,755.	413,704.
8		226,554.	168,911.	4,778.	52,865.
9	Other employee benefits	71,287.	40,562.	20,649.	10,076.
10	Payroll taxes	133,609.	98,186.	3,658.	31,765.
11	Fees for services (non-employees)				
a	Management	0.			
t	Legal	5,409.		5,409.	
C	Accounting	42,796.		42,796.	
c	Lobbying	0.			
	Professional fundraising services See Part IV, line 17.	0.	14 206		734.
	f Investment management fees	15,030.	14,296.		/34.
g	Other (If line 11g amount exceeds 10% of line 25, column	376,163.	′ 368,320.	2,566.	5,277.
40	(A) amount, list line 11g expenses on Schedule O)	0.	300,320.	2,300.	3,2,,,
13	Advertising and promotion	59,626.	44,584.	4.	15,038.
14	Information technology	12,037.	7,159.	3,627.	1,251.
15	Royalties	792.	792.	·	· · · · · · · · · · · · · · · · · · ·
16	Occupancy	108,541.	85,282.		23,259.
17	Travel	70,159.	53,207.	15,632.	1,320.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19	Conferences, conventions, and meetings	50,974.	43,583.		7,391.
20	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	0.			
23	Insurance	3,733.		3,733.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)			1	j
-	ADVERTISING	18,239.	16,199.	165.	1,875.
•	PRESENT VALUE ADJUSTMENT	15,708.	<u> </u>	15,708.	·
_	BANK FEES	4,233.	40.	2,851.	1,342.
	TAX REGISTRATION/FILING FEES	1,400.		1,400.	
6	All other expenses	817.	719.	6.	92.
	Total functional expenses Add lines 1 through 24e	7,499,509.	6,764,783.	168,737.	565,989.
26	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)	0.			Form 990 (2018)

art X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this P	art X		
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	5,106,229.	1	5,878,253
2	Savings and temporary cash investments	1,057,768.	2	1,516,403
3	Pledges and grants receivable, net	8,037,453.	3	6,862,841
4	Accounts receivable, net	9,819.	4	8,06
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees			
	Complete Part II of Schedule L	. O.	5	
6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	0.		
l _	organizations (see instructions) Complete Part II of Schedule L	0.	6	7
7 8	Notes and loans receivable, net	0.	7	,
	Inventories for sale or use	1,816.	L	1,23
9	Prepaid expenses and deferred charges	1,010.	9	1,23
Tua	Land, buildings, and equipment cost or			•
	other basis Complete Part VI of Schedule D			
	Less accumulated depreciation	16,830,709.	10c	14,409,78
11	Investments - publicly traded securities	0.	11	14,405,70
12	Investments - other securities See Part IV, line 11	0.	12	
13 14	Investments - program-related See Part IV, line 11	0.	13	
15	Intangible assets	5,916.	14 15	5,91
16	Other assets See Part IV, line 11	31,049,710.	16	28,682,57
17	Total assets. Add lines 1 through 15 (must equal line 34)	15,162.	17	81,67
18	Accounts payable and accrued expenses	4,759,789.	18	1,801,68
19	Grants payable	0.	19	1,001,00
	Deferred revenue	0.	20	
20 21	Tax-exempt bond liabilities	0.		
1	Loans and other payables to current and former officers, directors,		21	
22	trustees, key employees, highest compensated employees, and			
	disqualified persons Complete Part II of Schedule L	<u> </u>		
23	Secured mortgages and notes payable to unrelated third parties	0.	22	
24	Unsecured notes and loans payable to unrelated third parties	0.	24	
25	Other liabilities (including federal income tax, payables to related third		24	
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D	1,461,971.	25	2,339,26
26	Total liabilities. Add lines 17 through 25.	6,236,922.	26	4,222,62
	Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.		20	, , , , ,
27	Unrestricted net assets	188,807.	27	13,89
28	Temporarily restricted net assets	24,623,981.	28	24,446,05
29	Permanently restricted net assets	0.	29	
27 28 29 30 31 32 33	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34		Ì	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	<u>.</u>
33	Total net assets or fund balances	24,812,788.	33	24,459,94
34	Total liabilities and net assets/fund balances	31,049,710.	34	28,682,57

Form **990** (2018)

	90 (2048)				Pa	ge 12
Pärt	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8,9	41,	319.
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,4	99,	509.
3	Revenue less expenses Subtract line 2 from line 1	3		1,4	41,8	810.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		24,8	12,	788.
5	Net unrealized gains (losses) on investments	5	<u> </u>	-2,5	02,5	515.
√ 6	Donated services and use of facilities	6		6	78,	128.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			29,	738.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		1			
	33, column (B))	10		24;4	59,9	349.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			$oldsymbol{ol}}}}}}}}}}}}}}}}}}}$
					Yes	No
1	Accounting method used to prepare the Form 990 CashX Accrual Other					}
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair) IN	\		
	Schedule O					ئے۔
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?,			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis				 -	
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	├
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	led o	n a			
	separate basis, consolidated basis, or both					{
	X Separate basis					3
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		•	2c	х	
	of the audit, review, or compilation of its financial statements and selection of an independent acc			20		
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O	xpiaii	1 10			1
2 -			L		-	,
зa	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMP Circular A 1222	TOIT	1 IN	3a		x
h	the Single Audit Act and OMB Circular A-133?	erac	the	<u> </u>		
b	required audit or guide avolum why in Schedule O and describe any steps taken to undergo such au		1116	3 h	,	

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust ► Attach to Form 990 or Form 990-EZ

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Go to www irs.gov/Form990 for instructions and the latest information.

Name of the organization Employer identification number ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. 81-0623035 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives (1) more than 331/3 % of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization g Provide the following information about the supported organization(s) (i) Name of supported organization (II) EIN (iii) Type of organization (IV) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 support (see other support (see listed in your governing above (see instructions)) instructions) instructions) document? Yes No (A) (B) (C) (D)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2018

(E)

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Calendar year (or facal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total membershy fees received (Do not include any "unusual grants")	Sec	tion A. Public Support			- 1.1.	· · ·	,	
membership fees received (Do not included on part of the organization without charge	Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
organization's benefit and either paid to or expended on its behalf	1	membership fees received (Do not	9,390,704	26,090,970	14,090,353	7,528,388	7,718,425	64,818,840
furnished by a governmental unit to the organization without charge	2	organization's benefit and either paid						0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount of public support. Subract line 5 from line 4	3	furnished by a governmental unit to the					_	0
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 26 of the amount shown on line 11, column (f)	4	Total. Add lines 1 through 3	9,390,704	26,090,970	14,090,353	7,528,388	7,718,425	64,818,840
Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4	5	each person (other than a governmental unit or publicly supported organization) included on						
Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Amounts from line 4		• • • • • • • • • • • • • • • • • • • •						47,364,007
Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4. 9,390,704 26,090,970 14,090,353 7,528,388 7,718,425 64,818,840 7,718,425 7,748,44 7,948,418 7,718,425 7,948,418 7,748,418 7,748,418 7,748,418 7,748,418 7,748,418 7,748,418 7,748,418 7,748,418 7,		774						17,454,833
7 Amounts from line 4						1,,,,,,,,		
Section C. Computation of Public Support Percentage 10 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)). 11 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)). 12 2 21, 097 15 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)). 16 33113% support test - 2018. If the organization did not check a box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 16 Div-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifies as a publicly supported organization organization.			· · · · · · · · · · · · · · · · · · ·					
Section C. Computation of Public Support Percentage 14 Public support percentage from 2017 Schedule A, Part III, line 14 25.80 % Public support test - 2018. If the organization did not check the box on line 13, and line 15 is 331/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17 10% - facts-and-circumstances test - 2017. If the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.		Gross income from interest, dividends, payments received on securities loans,	9,390,704	26,090,970	14,090,353	7,528,388	7,718,425	64,818,840
activities, whether or not the business is regularly carried on			82	683,437	342,561	754,444	1,037,666	, 2,818,190
loss from the sale of capital assets (Explain in Part VI) . ATCCH. 1	9	activities, whether or not the business						0
Total support. Add lines 7 through 10	10	loss from the sale of capital assets	13.415	5 400				18 815
12 21.097 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)). 14 25.80 % 15 Public support percentage from 2017 Schedule A, Part II, line 14 . 15 27.78 % 16a 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	11		15,115	3,100		· ·		
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))		•				L	12	·
Section C. Computation of Public Support Percentage 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))		First five years. If the Form 990 is f	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	Sec				· · · · · · · · · · ·	• • • • • • • •		••••
Public support percentage from 2017 Schedule A, Part II, line 14				-	11 column (f))		14	25.80%
16a 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. b 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.				•				
box and stop here. The organization qualifies as a publicly supported organization. b 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization								
b 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			-					
this box and stop here. The organization qualifies as a publicly supported organization	b		-		_			
17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			·			•		
10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a				-			
Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.								
organization								
b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization					-	•	· · · · · · · ·	. 77
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	b							
Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								`
supported organization								
Instructions	18	supported organization						▶ □
							<u></u>	▶ 🔲

Schedule A (Form 990 or 990-EZ) 2018

	dule A (Form 990 or 990-EZ) 2018	-i4i D	anihad in Caa	*: F00/-\/2\			Page
Pa	Support Schedule for Organ (Complete only if you checke				ianization faile	d to qualify up	der Part II
	If the organization fails to qua						del Pait II
500	tion A. Public Support	Ander the	, teoto notea be	now, picase o	omprote rarer	,	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
		(a) ¥014	(6) 2010	(6) 2010	(a) 2017	(6) 2010	(1) 10(a)
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	\		,			
2	Gross receipts from admissions, merchandise					/	
-	sold or services performed, or facilities	\					i
	furnished in any activity that is related to the	/					
	organization's tax-exempt purpose	\					
3	Gross receipts from activities that are not an	<u></u>				/	
•	unrelated trade or business under section 513 .		\		/		
4	Tax revenues levied for the		1				
	organization's benefit and either paid to		\				
	or expended on its behalf		\				
5	The value of services or facilities		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	furnished by a governmental unit to the		\		/		
	organization without charge		\	· /	,		
6	Total. Add lines 1 through 5		1				
7 a	Amounts included on lines 1, 2, and 3		ľ				
	received from disqualified persons		\ \				
b	Amounts included on lines 2 and 3		\	-			
	received from other than disqualified		\ \ \				
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			X			· ·
С	Add lines 7a and 7b			\			
8	Public support. (Subtract line 7c from		/	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
	line 6)			.			
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year begınning in) ▶	(a) 2014	ு (நீ) 2015	(c) [√] 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6			\\			
10 a	Gross income from interest, dividends,	,		\			
	payments received on securities loans, rents, royalties, and income from similar			\			
	sources			\			
b	Unrelated business taxable income (less			\ \			
	section 511 taxes) from businesses			\			
	acquired after June 30, 1975	_/			<u> </u>		
С	Add lines 10a and 10b			1	1		
11	Net income from unrelated business	•					
	activities not included in line 10b/ whether or not the business is regularly				\		
	carried on				\		
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)				\		ļ
13	Total support (Add lines 9, 10c, 11,						
	and 12)		/	l	<u> </u>		
14	First five years. If the Form 990 is for	_			i i		
	organization, check this box and stop here.			<u> </u>	<u> </u>	<u> </u>	▶
	tion C. Computation of Public Supp		<u> </u>		,		
15	Public support percentage for 2018 (line 8,		•			. 15	%
16	Public support percentage from 2017 Scheo					16	%
	tion D. Computation of Investment					- \	
17	Investment income percentage for 2018 (lin					17	%
18	Investment income percentage from 2017 S					18	%
19 a	331/3% support tests - 2018. If the org					X .	
4	17 is not more than 331/3%, check this					•	
h	331/3% support tests - 2017. If the organ	ton hib notesin	chack a hov on	ling 14 or ling 11	0a and line 16 ii	e more than 3/31/	3 % and

line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2018

. Part IV **Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A. D. and F. if you checked 12d of Part I. complete Sections A and D. and complete Part V.)

Section A. All Supp	orting Organizations
---------------------	----------------------

ecti	on A. All Supporting Organizations			1
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	~ 2		·
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a	-	
b /	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		-
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	_	-
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a	-	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	-	-
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	53		_
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		-~
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		_
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		-
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		-
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	_ 10a	-	

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings)

those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities

Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement

- Parent of Supported Organizations Answer (a) and (b) below.
- Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2018

2a

2b

3a

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	s					
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	Nov 20, 1970 (explai	n in Part VI) See				
instructions. All other Type III non-functionally integrated supporting organization	z <u>ation</u> s r	nust complete Sectio	ns A through E				
Section A - Adjusted Net Income (A) Prior Year							
Section A - Adjusted Net income		(A) Filol Teal	(optional)				
1 Net short-term capital gain	1						
2 Recoveries of prior-year distributions	2						
3 Other gross income (see instructions)	3						
4 Add lines 1 through 3	4						
5 Depreciation and depletion	5						
6 Portion of operating expenses paid or incurred for production or							
collection of gross income or for management, conservation, or							
maintenance of property held for production of income (see instructions)	6						
7 Other expenses (see instructions)	7						
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8						
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year				
Section B - William Asset Amount		(A) Filor real	(optional)				
1 Aggregate fair market value of all non-exempt-use assets (see							
instructions for short tax year or assets held for part of year)			,				
a Average monthly value of securities	1a						
b Average monthly cash balances	1b						
c Fair market value of other non-exempt-use assets	1c						
d Total (add lines 1a, 1b, and 1c)	1d						
e Discount claimed for blockage or other		,					
factors (explain in detail in Part VI)							
2 Acquisition indebtedness applicable to non-exempt-use assets	2						
3 Subtract line 2 from line 1d	3						
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,		``	· ·				
see instructions)	4						
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6 Multiply line 5 by 035	6						
7 Recoveries of prior-year distributions	7						
8 Minimum Asset Amount (add line 7 to line 6)	8						
Section C - Distributable Amount			Current Year				
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1						
2 Enter 85% of line 1	2						
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4 Enter greater of line 2 or line 3	4						
5 Income tax imposed in prior year	5	The state of the s					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to							
emergency temporary reduction (see instructions)	6						
7 Check here if the current year is the organization's first as a non-functionall	y integra	ited Type III supporting	organization (see				
instructions)	_	•	•				

Schedule A (Form 990 or 990-EZ) 2018

Pärt	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tions (continuea)	·····
Secti	on D - Distributions	Current Year		
1_	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			<u></u>
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organized	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI) See instructions			,
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see Instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			<u> </u>
	(reasonable cause required - explain in Part VI) See			l ,
	instructions			
3	Excess distributions carryover, if any, to 2018			1
а	From 2013			
b	From 2014		ı	
С	From 2015			1
ď	From 2016			•
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)	· · · · · · · · · · · · · · · · · · ·		
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			1
4	Distributions for 2018 from			
	Section D, line 7 \$			
a	Applied to underdistributions of prior years		····	,
b	Applied to 2018 distributable amount			
с	Remainder Subtract lines 4a and 4b from 4	-		
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h			
	and 4b from line 1 For result greater than zero, explain in			
	Part VI. See instructions			-
7	Excess distributions carryover to 2019. Add lines 3j]
	and 4c		<u> </u>	
8	Breakdown of line 7			
a	Excess from 2014			
b	Excess from 2015	 -		
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			<u> </u>

Schedule A (Form 990 or 990-EZ) 2018

Part VI

Page 8 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, SECTION C, LINE 17A - 10% FACTS AND CIRCUMSTANCES TEST

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL ("AOSI") HAS ESTABLISHED THAT IT MEETS THE FACTS AND CIRCUMSTANCES TEST PROVIDED UNDER TREAS. REG. 1.170A-9(E)(3). PERTINENT FACTS AND CIRCUMSTANCES ARE DESCRIBED BELOW. AOSI NORMALLY RECEIVES MORE THAN 10 PERCENT, BUT LESS THAN 33 1/3 PERCENT, OF ITS SUPPORT FROM CONTRIBUTIONS FROM THE GENERAL PUBLIC. FOR 2018, AOSI'S PUBLIC SUPPORT WAS 25.80 PERCENT.

AOSI (DBA OPEN SOCIETY INSTITUTE - BALTIMORE) MAINTAINS A STRONG PROGRAM OF SOLICITATION FROM INDIVIDUALS IN THE GENERAL PUBLIC AND COMMUNITY, NATIONAL AND LOCAL FOUNDATIONS, PUBLIC CHARITIES AND CORPORATIONS. WITH 3.5 STAFF MEMBERS AND SUPPORT FROM THE COMMUNICATIONS TEAM, IT REGULARLY SOLICITS BY MAIL, EMAIL, VIA THE WEBSITE, IN PERSON AND WITH EVENTS. OPEN SOCIETY INSTITUTE - BALTIMORE SENDS DIRECT AND INDIRECT (INDIRECT SOLICITATIONS ARE NEWSLETTERS WITH "DONATE" BUTTONS) SOLICITATIONS ON A MONTHLY BASIS TO APPROXIMATELY 5000, RESULTING IN APPROXIMATELY 350-400 DONORS PER YEAR.

85-90% OF AOSI'S ACTIVITIES IN TERMS OF REVENUES AND EXPENSES ARE ATTRIBUTABLE TO THE OPEN SOCIETY INSTITUTE-BALTIMORE PROGRAM. AS THE OPEN SOCIETY FOUNDATIONS' U. S. PROGRAMS ONLY FIELD OFFICE, OPEN SOCIETY INSTITUTE-BALTIMORE SERVES THE BALTIMORE AND MARYLAND AREAS, FOCUSING ON THE ROOT CAUSES OF THREE INTERTWINED PROBLEMS IN BALTIMORE AND MARYLAND: DRUG ADDICTION, AN OVER-RELIANCE ON INCARCERATION, AND OBSTACLES THAT

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1, Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

IMPEDE YOUTH IN SUCCEEDING INSIDE AND OUT OF THE CLASSROOM. IT ALSO

SUPPORTS A GROWING CORPS OF SOCIAL ENTREPRENEURS COMMITTED TO UNDERSERVED POPULATIONS IN BALTIMORE.

AOSI MAINTAINS A GOVERNING BODY WHICH REPRESENTS THE BROAD INTERESTS OF
THE PUBLIC. THREE OUT OF AOSI'S 7 GOVERNING BOARD MEMBERS AND 16 MEMBERS
OF OPEN SOCIETY INSTITUTE - BALTIMORE ADVISORY BOARD ARE COMPOSED OF
THE GENERAL PUBLIC WITH EXPERTISE IN FIELDS THAT OPEN SOCIETY INSTITUTE BALTIMORE'S EXEMPT PROGRAMS FOCUS ON. OPEN SOCIETY INSTITUTE - BALTIMORE
EMPLOYS ISSUE AREA EXPERTS WHO, IN ADDITION TO MAKING GRANTS, MAY CONVENE
ADVOCATES IN THE COMMUNITY IN ORDER TO PROVIDE TECHNICAL ASSISTANCE OR TO
PROMOTE A PARTICULAR POLICY; THE EXPERTS MAY WORK WITH SCHOOL SYSTEM TO

PROMOTE POLICY.					ATTACHMENT	<u> </u>			
SCHEDULE A, PART II - OTHER INCOME									
DESCRIPTION	2014	2015	2016	2017	2018	TOTAL			
SPECIAL EVENTS	13,415	5,400				18,815			
TOTALS	13,415	5,400				18,815			

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Nam	e of the organization		Employer identification number
AL	LIANCE FOR OPEN SOCIETY INTERNATIONA	L, INC.	81-0623035
Pa	rt I Organizations Maintaining Donor Advi	sed Funds or Other Similar Funds or	
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	.,	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor		
_	funds are the organization's property, subject to the	-	
6	Did the organization inform all grantees, donors, a	• •	
	only for charitable purposes and not for the benef		
	conferring impermissible private benefit?	·	Yes No
Pa	rt II Conservation Easements.	W	
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e g , recr	·	of a historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution in	
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified I	nistoric structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or termin	nated by the organization during the
	tax year		
4	Number of states where property subject to conse	rvation easement is located >	
5	Does the organization have a written policy reg	arding the periodic monitoring, inspect	ion, handling of
	violations, and enforcement of the conservation eas		- 1 1 1
6	Staff and volunteer hours devoted to monitoring, inspect		
	>		,
7	Amount of expenses incurred in monitoring, inspect	ing, handling of violations, and enforcing c	onservation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2	(d) above satisfy the requirements of secti	on 170(h)(4)(B)(ı)
-	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports	conservation easements in its revenue and	d expense statement, and
•	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easemen		
Pa	rt III Organizations Maintaining Collections		r Similar Assets.
	Complete if the organization answered		
10			rayanya atatamant and balance about
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar	r assets held for public exhibition, edu	revenue statement and balance sneet cation, or research in furtherance of
	works of art, historical treasures, or other simila public service, provide, in Part XIII, the text of the fo	otnote to its financial statements that des	scribes these items
b	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its r	evenue statement and balance sheet
	works of art, historical treasures, or other similar	r assets held for public exhibition, edu	cation, or research in furtherance of
	public service, provide the following amounts relation		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of ar	t, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under SI		
а	Revenue included on Form 990, Part VIII, line 1		> \$
_ <u>b</u>	Assets included in Form 990, Part X		
For	Paperwork Reduction Act Notice, see the Instructions for	Form 990.	Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018			Page
Part VII Investments - Other Securities.			5
Complete if the organization answered (a) Description of security or category (including name of security)	(b) Book value	, Part IV, line 11b See Form 990 (c) Method of valua Cost or end-of-year mark	tion
(1) Financial derivatives			
(2) Closely-held equity interests			
(A)			
(B)			· · · · · · · · · · · · · · · · · · ·
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related.			•
Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11c See Form 990	, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valua Cost or end-of-year mark	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11d. See Form 990	, Part X, line 15
(a) De:	scription		(b) Book value
(1)			
(2)			
_(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) li	ne 15)	<u> </u>	
Part X Other Liabilities. Complete if the organization answered			m 990, Part X,
line 25.	·		
1. (a) Description of liability	(b) Book valu	<u>e</u>	
(1) Federal income taxes			
(2) PAYABLE TO OSI	2,293,9	·	
(3) DEFERRED RENT	45,3	343.	
(4)			
(5)			
(6)			
(7)			

JSA 8E1270 1 000 39433G 720F

Total (Column (b) must equal Form 990, Part X, col (B) line 25) ▶

(9)

2,339,263.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

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Part'XIII Supplemental Information (continued)

FIN 48 FOOTNOTE, PART X, LINE 2

AOSI IS EXEMPT FROM FEDERAL INCOME TAXES, AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. AOSI RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED.

SCHEDULE D, PART XI, LINE 2D

SUMMARIZED BALANCE OF (\$235,073) CONSISTS OF THE FOLLOWING:

GAINS ON FOREIGN EXCHANGE (\$232,122)

INVESTMENT MANAGEMENT FEES (\$15,030)

PRESENT VALUE ADJUSTMENT TO MULTI-YEAR PLEDGED RECEIVABLES \$29,655

TAX OVERPAYMENT REFUND (\$14,391)

REFUND OVER VENDOR (\$3,185)

SCHEDULE D, PART XII, LINE 2D

SUMMARIZED BALANCE OF (\$249,781) CONSISTS OF THE FOLLOWING:

GAINS ON FOREIGN EXCHANGE (\$232,122)

TAX OVERPAYMENT REFUND (\$14,391)

REFUND OVER VENDOR (\$3,185)

RETURN OF UNSPENT GRANT FUNDS (\$83)

(Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

Open to Public

OMB No 1545-0047

Department of the Treasury

► Go to www irs.gov/Form990 for instructions and the latest information.

Interna	Revenue Service					Inspection
	of the organization				Employer identifi	
	IANCE FOR OPEN SOCIETY				, 81-06230	
Pärt	General Information of Form 990, Part IV, line 14		Outside the	United States. Comple	ete if the organization	answered "Yes" or
1	For grantmakers. Does the orga	anization mainta	ain records to s	substantiate the amount of	its grants and other	
	assistance, the grantees' eligibi					
!	grants or assistance?					X Yes No
	For grantmakers. Describe in outside the United States	Part V the org	anization's pro	ocedures for monitoring t	he use of its grants a	nd other assistance
3	Activities per Region (The follo	wing Part I, line	3 table can be	e duplicated if additional sp	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in the region
				۲-,		
(1)	SUB-SAHARAN AFRICA	0	0	GRANTMAKING		263,907
(2)	SUB-SAHARAN AFRICA	0	1	PROGRAM SERVICES		163,737
\-/						
(3)						
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(4)		_	 			
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(13)						 .
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(15)		-	`			
(16)				•		
					•	
(17)	Cubtotal	+	<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>		
3a b	Subtotal		1	_		427,644

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

427,644 Schedule F (Form 990) 2018

sheets to Part I

c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2018

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, Inc. 15, for any recipient who received more than \$5,000. Dart II can be directed if additional concessions and accordance to the concession of the co Part II

-	Part IV, line 15, for any recipient who received	cipient who received	ved more than \$5,000. Part II can be duplicated if additional space is needed	Part II can be di	uplicated if additio	nal space is	needed.		•
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				CONSTITUTION					
<u>(1</u>			SUB-SAHARAN AFRICA	ALISM FUND	27,519	WIRE			
				CONSTITUTION					
(2)			SUB-SAHARAN AFRICA	ALISM FUND	10,240	WIRE			
				CONSTITUTION					
(3)			SUB-SAHARAN AFRICA	ALISM FUND	23,451	WIRE			
				CONSTITUTION					
(4)			SUB-SAHARAN AFRICA	ALISM FUND	13,984	WIRE			
				CONSTITUTION					
(2)			SUB-SAHARAN AFRICA	ALISM FUND	27,519	WIRE			
				CONSTITUTION			\		
(9)			SUB-SAHARAN AFRICA	ALISM FUND	27,519	WIRE	·		
				CONSITUTION					
(2)			SUB-SAHARAN AFRICA	ALISM FUND	5,825	WIRE			
				CONSTITUTION					
(8)			SUB-SAHARAN AFRICA	ALISM FUND	23,451	WIRE			
				CONSTITUTION					
(6)			SUB-SAHARAN AFRICA	ALISM FUND	27,519	WIRE			i
				CONSTITUTION					
(10)			SUB-SAHARAN AFRICA	ALISM FUND	27,888	WIRE			
				CONSTITUTION					
(11)			SUB-SAHARAN AFRICA	ALISM FUND	20,900	WIRE		•	
				CONSTITUTION					
(12)			SUB-SAHARAN AFRICA	ALISM FUND	28,092	WIRE			
(13)					-				
75.1									
(14)									
(15)									
(16)									
(2.1)									

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ~

3 Enter total number of other organizations or entities...........

Schedule F (Form 990) 2018

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81-0623035

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.

Schedule F (Form 990) 2018

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed

Schedule F (Form 990) 2018 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance ^ (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (14) Ð (2) 3 ₹ 9 8 (11) 9 8 (6) 5 (12) (13) (15) (16) (17) 18

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Part	IV Foreign Forms	
1	Was the organization a US transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a US Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	X No

Schedule F (Form 990) 2018

Schedule F, (Form 990) 2018

Part V Supplem

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

MONITORING THE USE OF GRANT FUNDS

THE GRANTEES FUNDED BY AOSI ARE IDENTIFIED, RECOMMENDED, AND APPROVED BY AOSI BOARD MEMBERS. THE PRIMARY MONITORING MECHANISMS ARE NARRATIVE AND FINANCIAL REPORTS THAT ARE REQUIRED ON AT LEAST AN ANNUAL BASIS. SITE VISITS MAY BE CONDUCTED IF THE NEED OR OPPORTUNITY ARISES.

ACCOUNTING METHOD

THE GRANT EXPENDITURES REPORTED ON PARTS I AND II ARE REPORTED ON THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULE

(Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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Open to Public

Employer identification number

81-0623035

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. Name of the organization

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for the latest information.

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	Part	

Š X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) ADVOCATES FOR CHILDREN AND YOUTH, INC							TO FOCUS ON
1 N CHARLES STREET BALTIMORE, MD 21201	52-1555895	IRC 501(C)(3)	165,000				ADVOCACY EFFORTS IN
(2) ADVOCATES FOR CHILDREN AND YOUTH, INC	-						TO ENGAGE IN
1 N CHARLES STREET BALTIMORE, MD 21201	52-1555895	IRC 501(C)(3)	60,000				RESEARCH, PUBLIC
(3) AMERICAN CIVIL LIBERTIES UNION FOUNDATION O							TO SUPPORT THE
3600 CLIPPER MILL ROAD BALTIMORE, MD 21210	23-7209538	IRC 501(C)(3)	90,000				GRANTEE'S POLICY
(4) AMERICAN CIVIL LIBERTIES UNION FOUNDATION O							TO ADVOCATE FOR
3600 CLIPPER MILL ROAD BALTIMORE, MD 21210	23-7209538	IRC 501(C)(3)	100,000				EQUITABLE SCHOOL
(5) ASSOCIATION OF BALTIMORE AREA GRANTMAKERS							TO PARTIALLY
2 EAST READ STREET BALTIMORE, MD 21202	52-1326863	IRC 501(C)(3)	20,360				SUPPORT THE
(6) BALTIMORE CURRICULUM PROJECT							TO FORMALIZE CITY
2707 E FAYETTE STREET BALTIMORE, MD 21224	52-1961406		75,000				SPRINGS
(7) BEHAVIORAL HEALTH LEADERSHIP INSTITUTE INC	 -						TO SUPPORT A MOBILE
2200 ARDEN ROAD BALTIMORE, MD 21209	41-2114016	IRC 501(C)(3)	100,000				TREATMENT VAN THAT P
(8) BEHAVIORAL HEALTH SYSTEM BALTIMORE INC	:						TO PROVIDE HARM
100 S CHARLES STREET BALTIMORE, MD 21201	52-1519025	IRC 501(C)(3)	100,000				REDUCTION OUTREACH,
(9) BUSINESS VOLUNTEERS MARYLAND							TO PROVIDE
1201 S SHARP STREET BALTIMORE, MD 21230	52-1810831	IRC 501(C)(3)	45,000				TECHNICAL
(10) CASA DE MARYLAND							TO PROVIDE RAPID
8151 15TH AVE HYATTSVILLE, MD 20783	52-1372972	IRC 501(C)(3)	25,100				RESPONSE, CASE
(11) CASA DE MARYLAND					-		TO SUPPORT THE
8151 15TH AVE HYATTSVILLE, MD 20783	52-1372972	IRC 501(C)(3)	100,000				CONTINUED
(12) CENTER FOR SUPPORTIVE SCHOOLS							TO SUPPORT THE
911 COMMONS WAY PRINCETON, NJ 08540	22-2962532	IRC 501(C)(3)	10,000				GRANTEE'S PEER
2 Enter total number of section 501(c)(3) and government o	government c	organizations list	rganizations listed in the line 1 table.			▲ :: :: ::	

Enter total number of other organizations listed in the line 1 table.

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule I (Form 990) (2018)

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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OMB No 1545-0047

Open to Publ

► Go to www.irs.gov/Form990 for the latest information.

Employer identification number 81-0623035

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	General Information on Grants a	
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ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.

- × Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and
 - Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Part II

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CENTER ON BUDGET AND POLICY PRIORITIES							TO SUPPORT THE
820 FIRST STREET NE, WASHINGTON, DC 20002	52-1234565	IRC 501(C)(3)	50,000				MARYLAND CENTER ON
(2) CIVIC WORKS, INC							TO ENABLE THE
2701 ST LO DRIVE BALTIMORE, MD 21213	52-1925614	IRC 501(C)(3)	75,000				GRANTEE'S BALTIMORE
(3) COMMUNITY INITIATIVES							TO ENABLE
1000 BROADWAY, SUITE 480 OAKLAND, CA 94607	94-3255070	IRC 501(C)(3)	50,000				ATTENDANCE WORKS TO
(4) COMMUNITY LAW IN ACTION, INC							TO ENGAGE IN
520 W FAYETTE STREET BALTIMORE, MD 21201	06-1710518	IRC 501(C)(3)	105,000				ORGANIZING,
(5) COMMUNITY MEDIATION PROGRAM INC							TO SUPPORT
333 GREENMOUNT AVENUE BALTIMORE, MD 21218	52-2086670	IRC 501(C)(3)	25,000				RESTORATIVE
(6) CONSUMER HEALTH FIRST							TO PROVIDE GENERAL
PO BOX 59202 POTOMAC, MD 20854	81-0839592	IRC 501(C)(3)	175,000				SUPPORT
(7) FREESTATE LEGAL PROJECT	·—-						TO ADVOCATE FOR
2526 SAINT PAUL STREET BALTIMORE, MD 21218	26-2174290	IRC 501(C)(3)	50,000				PRACTICES AND
(8) FUND FOR EDUCATIONAL EXCELLENCE							TO SUPPORT STRONG
800 N CHARLES ST BALTIMORE, MD 21201-5322	52-1129402	IRC 501(C)(3)	40,000				SCHOOLS MARYLAND TO
(9) FUSION PARTNERSHIPS INC							TO BUILD OUT FOR
1601 GUILFORD AVENUE BALTIMORE, MD 21202	52-2148413	IRC 501(C)(3)	65,000				JUSTICE'S
(10) FUSION PARTNERSHIPS INC							TO SUPPORT THE
1601 GUILFORD AVENUE BALTIMORE, MD 21202	52-2148413	IRC 501(C)(3)	25,000				TEACHERS' DEMOCRACY
(11) FUSION PARTNERSHIPS INC							TO PROVIDE SUPPORT
1601 GUILFORD AVENUE BALTIMORE, MD 21202	52-2148413	IRC 501(C)(3)	90,000				TO BALTIMORE HARM
(12) FUSION PARTNERSHIPS INC							TO STRENGTHEN POWER
. 1601 GUILFORD AVENUE BALTIMORE, MD 21202	52-2148413	IRC 501(C)(3)	100,000				INSIDE'S CAPACITY TO
2 Enter total number of section 501(c)(3) and government or	government c	organizations lis	ganizations listed in the line 1 table.	le		▲ :: :: ::	

Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

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SCHEDULE (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

2018	Open to Public	nenertion
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Employer identification number 81-0623035

OMB No 1545-0047

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. Department of the Treasury Internal Revenue Service

Name of the organization

General Information on Grants and Assistance

Part I

► Go to www.irs.gov/Form990 for the latest information.

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Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II

				-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(t) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) FUSION PARTNERSHIPS INC							TO ENABLE THE
1601 GUILFORD AVENUE BALTIMORE, MD 21202	52-2148413	IRC 501(C)(3)	75,000				MARYLAND
(2) GLSEN INC							TO ENABLE GLSEN
110 WILLIAM STREET NEW YORK, NY 10038-3901	04-3234202	IRC 501(C)(3)	25,000				MARYLAND TO ADDRESS
(3) HOLISTIC LIFE FOUNDATION, INC							TO PILOT THE
2601 N HOWARD STREET BALTIMORE, MD 21218	03-0375886		25,000				GRANTEE'S BRIDGING
(4) JEWS UNITED FOR JUSTICE INC							TO SUPPORT THE
1100 H ST NW WASHINGTON, DC 20005	52-2346578	IRC 501(C)(3)	50,000				GRANTEE'S
(5) JFA INSTITUTE							TO CONDUCT ANALYSIS
720 KEARNEY STREET DENVER, CO 80220	38-3680643	IRC 501(C)(3)	78,500				AND MAKE POLICY RECO
(6) JOB OPPORTUNITIES TASK FORCE, INC							TO SUPPORT ITS
201 N CHARLES STREET BALTIMORE, MD 21201	52-2278450	IRC 501(C)(3)	100,000				COMMUNICATIONS AND
(7) JOHNS HOPKINS UNIVERSITY							TO SUPPORT A TWO
W-400 WYMAN PARK BALTIMORE, MD 21218	52-0595110	IRC 501(C)(3)	7,500				DAY WORKSHOP TO
(8) JUSTICE POLICY INSTITUTE	1						TO ENGAGE IN
1012 14TH STREET NW WASHINGTON, DC 20005	20-0102713	IRC 501(C)(3)	150,000				RESEARCH, POLICY
(9) LIGHT OF TRUTH CENTER, INC	•						TO IDENTIFY AND
2233 ORLEANS ST BALTIMORE, MD 21231	52-2193286	IRC 501(C)(3)	75,000				TRAIN NEW PEER
(10) NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEP							TO PROVIDE GENERAL
28 EAST OSTEND STREET BALTIMORE, MD 21230	52-1591416	IRC 501(C)(3)	170,000				SUPPORT
(11) NO BOUNDARIES COALITION, INC							TO SUPPORT NO
1808 PENN AVE BALTIMORE, MD 21217-3213	30-0788872	IRC 501(C)(3)	50,000				BOUNDARIES
(12) PLAYWORKS EDUCATION ENERGIZED	-1						TO ENABLE PLAYWORKS
2601 N HOWARD STREET BALTIMORE, MD 21218	94-3251867	IRC 501(C)(3)	25,000				MARYLAND TO IMPLEMEN
2 Enter total number of section 501(c)(3) and government or	government c	rganizations list	ganizations listed in the line 1 table				

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

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SCHEDULE 1

(Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

Open to Pub Inspection

r the latest information.

Employer identification number 81-0623035

► Go to www.ir.		INC.
•		ALLIANCE FOR OPEN SOCIETY INTERNATIONAL,
		SOCIETY
, Li	_	OPEN
e Treasu Service	anization	FOR
Department of the Treasury internal Revenue Service	Vame of the organization	ALLIANCE

Department of the Treasury Internal Revenue Service	sury		Ā	► Attach to Fori Go to www.irs.gov/Form990 for
Name of the organization	Ę			
ALLIANCE FOR	OPEN	SOCIETY	ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.	INC.
Part I Gener	al Infor	mation on	Part I General Information on Grants and Assistance	ınce

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II

Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PROGRESSIVE MARYLAND EDUCATION FUND, INC							TO SUPPORT THE
P O BOX 6988 LARGO, MD 20792	03-0401249	IRC 501(C)(3)	20,000				GRANTEE'S
(2) PUBLIC JUSTICE CENTER, INC							TO SUPPORT THE
ONE N CHARLES STREET BALTIMORE, MD 21201	52-1412226	IRC 501(C)(3)	100,000				GRANTEE'S CONTINUED
(3) STRONG CITY BALTIMORE							TO ENABLE THE
3503 N CHARLES STREET BALTIMORE, MD 21218	52-0897806	IRC 501(C)(3)	25,000				MARYLAND JUSTICE
(4) THE EDUCATION TRUST	,						TO GENERATE DATA
1250 H ST N W WASHINGTON, D C , DC 20005	52-1982223	IRC 501(C)(3)	50,000				AND POLICY ANALYSES
(5) UNIVERSITY OF MARYLAND BALTIMORE FOUNDATION							TO SUPPORT THE
620 W BALTIMORE STREET BALTIMORE, MD 21201	31-1678679	IRC 501(C)(3)	100,000				POSITIVE SCHOOLS
(6) WIDE ANGLE YOUTH MEDIA							TO SUPPORT YOUTH
2601 N HOWARD STREET BALTIMORE, MD 21218	52-2276602	IRC 501(C)(3)	100,000				PRODUCED MEDIA

(10)		
(11)		
(12)		
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	•	34.
3 Enter total number of other organizations listed in the line 1 table	•	2.
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Sched	Schedule I (Form 990) (2018)

OCCUMENTARY FILM

25,000

IRC 501(C)(3)

13-2740460

10,000

IRC 501(C)(3)

13-2740460

115 WEST 29TH STREET NEW YORK, NY 10001

(6)

(8) WOMEN MAKE MOVIES, INC

115 WEST 29TH STREET NEW YORK, NY 10001

(7) WOMEN MAKE MOVIES, INC

TO SUPPORT

TO USE THE

RODUCTION OF A

JSA 8E12881000 39433G 720F

Schedule I (Form 990) (2018)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Part III

	art in can be adpreaded if administration of the control	מבי ובי הבי					
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal, other)	(f) Description of non-cash assistance	·
1 BALTII	1 BALTIMORE COMMUNITY FELLOWSHIPS	13	740,749				I
2 MENA	2 MENA LEGAL SCHOLARSHIPS	15	431,093				1
က							
4							1
22							
9							ļ
7							l
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	nformation re	quired in Part I, I	ine 2, Part III, c	olumn (b), and any o	ther additional	1

MONITORING THE USE OF GRANT FUNDS

THE GRANTEES FUNDED BY AOSI ARE IDENTIFIED, RECOMMENDED, AND APPROVED BY

AOSI BOARD MEMBERS. THE PRIMARY MONITORING MECHANISMS ARE NARRATIVE AND

FINANCIAL REPORTS THAT ARE REQUIRED ON AT LEAST AN ANNUAL BASIS. SITE

VISITS MAY BE CONDUCTED IF THE NEED OR OPPORTUNITY ARISES, BUT ARE NOT A

REGULAR COMPONENT OF GRANT MONITORING.

V 18-7.5F

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.

Employer identification number 81-0623035

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			Ĭ
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			.
	Travel for companions Payments for business use of personal residence			. !
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			ı
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			. 1
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1 _b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			1
_	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	Ì	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			\Box
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			. 1
	Independent compensation consultant Compensation survey or study			.
	Form 990 of other organizations Approval by the board or compensation committee	ŀ		.
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Х	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			. 1
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of		[
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III			1
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			. 1
	compensation contingent on the net earnings of			
а	The organization?	6a		Х
b	Any related organization?	6b		Χ,
	If "Yes" on line 6a or 6b, describe in Part III			1
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			—
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		
For Pa	perwork Reduction Act Notice, see the Instructions for Form 990.	le J (Fo	rm 990	2018

Schedule J (Form 990) 2018

Partil Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that Individual

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		(B) Breakdown of W-2	of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)(D)	in column (B) reported as deferred on pnor Form 990
MAIJA ARBOLINO	Ξ	0	0	0.	0	0.	0	0.
DIRECTOR/TREASURER	Ξ	344,702.	973.	4,902.	55,566.	52,614.	458,757.	
CHRISTOPHER E. STONE	Ξ	0	.0	0	0	0	.0	0.
2 FORMER PRESIDENT/DIRECTOR	Ξ	0.	.0	1,008,299.	0	0	1,008,299.	0.
DEBORAH FINE	Ξ	0	.0	0	0	0.	0	0.
3DIRECTOR/SECRETARY	Ξ	250,125.	973.	0	37,947.	19,911.	308,956.	ļ
PATRICK GASPARD	Ξ	0	. 0	0.	0.	0	0	0
DIRECTOR/PRESIDENT	Ξ	734,904.	. 000,000	2,622.	94,500.	47,593.	939,619.	
DIANA MORRIS	Ξ	202,775.	. 876.	20,037.	30,774.	42,413.	296,875.	
5PROGRAM DIRECTOR	€	22,	. 76	2,226.	3,419.	4,713.	32,986.	
LORNA (TRACY) BROWN	€	130,569.	973.	7,643.	19,585.	44,476.	203,246.	
SASSOCIATE PROGRAM DIRECTOR	Ξ	o	.0	0.	0	0.	0	0.
KAREN WEBBER	€	140,257.	973.	2,199.	21,039.	44,476.	208,944.	
DIVISION DIRECTOR	Ξ	0	.0	0	0	0	0	0
PAMELA KING	Ξ	117,343.	. 973.	15,038.	18,771.	44,848.	196,973.	
8 DIVISION DIRECTOR	Ξ	0.	.0	0.	0.	0.	0	0.
SCOTT NOLEN	Ξ	123,988.	. 973.	467.	13,114.	44,476.	183,018.	
9TEAM MANAGER	(ii)	0	0	0.	0.	. 0	.0	0.
	Ξ							
10	Ξ							
	Ξ							
11	Ξ							
	Ξ							
12	Ξ							
	Ξ							
13	(ii)							
	Ξ							
14	Ξ							
	Ξ							
15	Ξ							
	Ξ							
16	Ξ							
							Sche	Schedule J (Form 990) 2018

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Schedule J (Form 990) 2018 Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 4A

THE FOLLOWING INDIVIDUALS RECEIVED A SEVERANCE PAYMENT DURING 2018:

CHRISTOPHER STONE - \$1,008,299

SCHEDULE J, PART I, LINE 4B

THE FOLLOWING 457(F) AMOUNTS WERE PAID OUT DURING THE YEAR:

CHRISTOPHER STONE - \$274,285. THIS AMOUNT VESTED IN 2017 AND WAS REPORTED

ON SCHEDULE J, PART II, COLUMN (B)(III) ON THE 2017 TAX RETURN.

SCHEDULE M (Form 990)

Noncash Contributions

Attach to Form 990.

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. 81-0623035 **Types of Property** (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1q Art - Works of art 2 Art - Historical treasures Art - Fractional interests /. Books and publications 5 Clothing and household goods Cars and other vehicles. 6 Boats and planes Intellectual property Х 214,619. FAIR MARKET VALUE 5,080. 9 Securities - Publicly traded 10 Securities - Closely held stock . . . 11 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other. Real estate - Residential 15 16 Real estate - Commercial Real estate - Other 17 18 Collectibles Food inventory 19 20 Drugs and medical supplies . . . 21 22 Historical artifacts. 23 Scientific specimens Archeological artifacts 24 25 Other ►(26 Other ►(27 Other ►(28 Other ►(Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required Х 30a b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Х b If "Yes," describe in Part II 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule M (Form 990) 2018

describe in Part II

Schedule M. (Form 990) (2018)

Part II

Page 2

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Open to Public Inspection

OMB No 1545-0047

Name of the organization

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.

Employer identification number 81-0623035

PART I, LINE 15

EFFECTIVE SEPTEMBER 1, 2003, AOSI ENTERED INTO AN AGREEMENT WITH OSI WHEREBY OSI AGREED TO PROVIDE CERTAIN SERVICES TO AOSI. PURSUANT TO THE AGREEMENT, OSI MAINTAINS ON ITS PAYROLL AND BENEFIT PLANS CERTAIN EMPLOYEES WHO PROVIDE SERVICES TO AOSI. OSI ALSO PROVIDES SPACE AND OTHER SUPPORT SERVICES UNDER THE AGREEMENT. DURING THE YEAR ENDED DECEMBER 31, 2018, AOSI RECORDED EXPENSES OF \$2,964,091 FOR SERVICES UNDER THE AGREEMENT, INCLUDING \$2,713,467 FOR SALARIES AND BENEFITS. AT DECEMBER 31, 2018, AOSI HAD PAYABLE OF \$2,293,920 DUE TO OSI FOR SERVICES RENDERED UNDER THE AGREEMENT.

PART VI, SECTION B, LINE 11B

AOSI'S AUDIT COMMITTEE IS IN CHARGE OF REVIEWING THE AUDITED FINANCIAL STATEMENTS AND THE 990 TAX RETURN. THE FORM 990 IS PREPARED IN-HOUSE AND REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM AND THE AUDIT COMMITTEE. THE FORM 990 WILL BE PROVIDED TO AOSI'S GOVERNING BOARD PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

PART VI, SECTION B, LINE 12C

AOSI CONFLICTS OF INTEREST AND GIFT ("THE POLICY") REQUIRES BOARD MEMBERS, OFFICERS, EXPERT/ADVISORY COMMITTEE MEMBERS, AND EMPLOYEES TO CERTIFY COMPLIANCE WITH THE POLICY AND DISCLOSE AFFILIATIONS WITH ORGANIZATIONS OR INDIVIDUALS WITH WHOM AOSI DOES BUSINESS ON AN ANNUAL BASIS. THE POLICY REQUIRES BOARD MEMBERS, OFFICERS, EXPERT/ADVISORY

Employer identification number

81-0623035

COMMITTEE MEMBERS, AND EMPLOYEES THAT HAVE AN "INTEREST" (AS THAT TERM IS DEFINED IN THE POLICY), WITH RESPECT TO A "TRANSACTION" (AS THAT TERM IS DEFINED IN THE POLICY) BEING CONSIDERED FOR APPROVAL BY THE BOARD, TO DISCLOSE THE INTEREST, IN WRITING, TO AOSI. IF THE TRANSACTION IS BEING CONSIDERED FOR APPROVAL BELOW THE BOARD LEVEL, THE INDIVIDUAL SHALL DISCLOSE THE INTEREST, IN WRITING, TO THE PRESIDENT OF THE BOARD.

MOREOVER, THE POLICY REQUIRES SUCH INDIVIDUALS TO RECUSE THEMSELVES FROM CONSIDERATION OF THE RELEVANT TRANSACTION AND ALL RELATED DISCUSSIONS, UNLESS THEY ARE ASKED BY THE DECISION-MAKERS TO PROVIDE NECESSARY INFORMATION REGARDING THE PROPOSED TRANSACTION. IN NO EVENT MAY INTERESTED INDIVIDUALS APPROVE TRANSACTIONS IN WHICH THEY HAVE AN INTEREST, NOR MAY THEY BE PRESENT WHEN A VOTE IS TAKEN WITH RESPECT TO THE TRANSACTION.

PART VI, SECTION B, LINE 15 OFFICERS COMPENSATION PROCESS

EMPLOYEES OF OPEN SOCIETY INSTITUTE ("OSI"), A RELATED SECTION 501(C)(3)

TAX EXEMPT ORGANIZATION, ARE SECONDED TO AOSI AND SOME SERVE AS OFFICERS

OF AOSI. AOSI DOES NOT REIMBURSE OSI OR PAY OFFICERS COMPENSATION FOR

TIME SPENT ON AOSI MATTERS. HOWEVER, AOSI DOES REIMBURSE OSI FOR

PERSONNEL COSTS RELATED TO OSI EMPLOYEES SECONDED TO AOSI AND WHO WORK

FOR THE OPEN SOCIETY INSTITUTE-BALTIMORE PROGRAM. THESE EMPLOYEES'

COMPENSATION IS DETERMINED BY OPEN SOCIETY INSTITUTE, AND IS BASED ON

MARKET COMPARABLE DATA AND IS DOCUMENTED IN OPEN SOCIETY INSTITUTE'S

RECORDS.

PART VI, SECTION C, LINE 19

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND

Name of the organization

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.

Employer identification number

81-0623035

FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

PART XI, LINE 6

DURING 2018, AOSI RECEIVED IN-KIND GRANTS OF SERVICES AND USE OF FACILITIES RELATED TO 2017 ACTIVITIES VALUED AT \$678,128 IN SUPPORT OF CHARITABLE OPERATIONS.

PART XI, LINE 9

SUMMARIZED BALANCE OF \$29,738 CONSISTS OF THE FOLLOWING:

PRESENT VALUE ADJUSTMENT TO MULTI-YEAR PLEDGED RECEIVABLES \$29,655

RETURN OF UNSPENT FUNDS FROM PRIOR YEARS' GRANT \$83

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. ("AOSI") SEEKS TO
TRANSFORM CLOSED SOCIETIES INTO OPEN SOCIETIES AND TO PROTECT AND
EXPAND THE VALUES OF EXISTING OPEN SOCIETIES. AOSI'S PURPOSES
INCLUDE: (A) COORDINATING, ADMINISTERING, AND ADVISING NATIONAL AND
REGIONAL PROGRAMS BOTH IN THE UNITED STATES AND ABROAD ON A RANGE OF
ISSUES, INCLUDING PUBLIC HEALTH, EDUCATION, AND, MORE GENERALLY,
DEVELOPMENT OF CIVIL SOCIETY; (B) EDUCATING THE PUBLIC ABOUT ISSUES
CONCERNING SOCIETIES ATTEMPTING TO TRANSFORM FROM TOTALITARIAN OR
AUTHORITARIAN RULE TO DEMOCRATIC MARKET ECONOMIES; AND (C) PROMOTING
THE VALUES OF OPEN, DEMOCRATIC SOCIETIES BOTH DOMESTICALLY AND
INTERNATIONALLY.

Name of the organization

ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC.

Employer identification number 81-0623035

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

OPEN SOCIETY INSTITUTE-BALTIMORE IS THE SOLE FIELD OFFICE OF THE OPEN SOCIETY FOUNDATIONS, U.S. PROGRAMS. WE FOCUS ON THE ROOT CAUSES OF THREE INTERTWINED PROBLEMS: LACK OF IDEAS AND RESOURCES TO IMPROVE HEALTHY EQUITY AND ACCESS TO HIGH-QUALITY BEHAVIORAL HEALTH SERVICES, AN OVER-RELIANCE ON INCARCERATION, AND OBSTACLES THAT IMPEDE YOUTH IN SUCCEEDING IN AND OUT OF THE CLASSROOM. OUR COMMUNITY FELLOWSHIPS PROGRAM ENGAGES A NETWORK OF 200 SOCIAL ENTEREPRENEURS ADDRESSING PROBLEMS IN UNDERSERVED BALTIMORE COMMUNITIES. WE SUPPORT STRATEGIC THINKING AND BOLD ACTION THAT RESULT IN LASTING CHANGE AND JUSTICE FOR ALL.

FORM 990, PART III, LINE 4D - OTHER	PROGRAM SERVICES	;	ATTACHMENT 3	
DESCRIPTION		GRANTS	EXPENSES	REVENUE
GRANTS MANAGEMENT			10,990.	
GRANT MAKING SUPPORT GROUP	(821.	
	TOTALS		11,811.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990	0 for instructions and the latest information.
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OMB No 1545-0047 2018

Open to Public Employer identification number Inspection

(f) Direct controlling

81-0623035 (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (c)
Legal domicile (state
or foreign country) (b) Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity ALLIANCE FOR OPEN SOCIETY INTERNATIONAL, INC. Part I

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Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year Part II

status Direct controlling controlled controlled entity?	Yes No		N/A X		N/A X		N/A X		N/A X		x solution		FPR X		N/A X	Schedule R (Form 990) 2018
(e) Public chanty status (if section 501(c)(3))			PF		PF		PF				PF		•			
(d) Exempl Code section			501(C)(3)		501(C)(3)		501(C)(3)		501(C)(4)		501 (C)(3)		501(C)(4)		501(C)(4)	
(c) Legal domicile (state or foreign country)			NY		DE		NY		DC		NY		DE		DE	
(b) Primary activity			CHARITABLE		CHARITABLE		CHARITABLE		SOC. WELFARE		CHARITABLE		SOC. WELFARE		SOC. WELFARE	
ated organization	: : : : : : : : : : : : : : : : : : : :	13-7029285	NEW YORK, NY 10019	26-3753801	NEW YORK, NY 10019	13-3095822	NEW YORK, NY 10019	52-2028955	NEW YORK, NY 10019	13-3965896	NEW YORK, NY 10019	26-4351242	NEW YORK, NY 10019	35-7090597	WILMINGTON, DE 19809	a Instructions for Form 990
(a) Name, address, and EIN of related organization		(1) OPEN SOCIETY INSTITUTE	224 WEST 57TH STREET	(2) FOUNDATION TO PROMOTE OPEN SOCIETY	224 WEST 57TH STREET	(3) OPEN SOCIETY FUND, INC	224 WEST 57TH STREET	(4) OPEN SOCIETY POLICY CENTER	224 WEST 57TH STREET	(5) SOROS ECONOMIC DEVELOPMENT FUND	224 WEST 57TH STREET, 9TH FLOO	(6) FUND FOR POLICY REFORM, INC	224 WEST 57TH STREET	(7) FUND FOR POLICY REFORM	C/O CHRISTIANA TRUST,501 CARR	For Panarwork Raduction Act Notice see the Instructions for Form 990

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Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

(a) Name, address, and EIN of related organization	and EIN of mization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispropertements silocations?	(t) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner? Yes No	(k) Percentage ownership
(2)											
(3)											
(4)											
(5)											
(9)											
(2)											
Part IV Identific Ine 34,	cation of Relate, because it had	Identification of Related Organizations Taxable line 34, because it had one or more related orga	Taxable ated orga	as a Corporati Inizations treate	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	ete if the orgar or trust during t	ıızatıon answer ne tax year.	sə ", pə	on Form 990,	Part IV	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(c) (d) (e) (e) (e) Legal domicile Direct controlling Type of entity (state or foreign entity (C corp. S corp. or irust)	(f) Share of total income	(g) (h) (l) Share of Percentage Secton end-of-year assets ownership controlled controlled entury	(h) Percentage ownership	(I) Section 12(b)(13) controlled entity?
								Yes
(1)								
(2)								
(3)								_
(4)								ļ
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						Schedule R (Form 990) 2018	R (Form 99) 2018

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Pour V Transactions With Balated Organizations Complete if the organization answered "Ves" on Form 000 Dart IV line 34 35h or 36	on Form 990 Bar	H IV line 34 35h or 36			
	OIL OIL 330, I A	111, IIIIE 34, 335, 01 30.			,
Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	S S
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ated organizations lis	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	×
b Gift, grant, or capital contribution to related organization(s)				1b	×
c Gift, grant, or capital contribution from related organization(s),			-	1c X	
d Loans or loan guarantees to or for related organization(s)				1d	×
e Loans or loan guarantees by related organization(s)			-	1e	×
				- 1	- ,
]	- 5	×
Social of assets from related organization(s)			:	1h	×
				i=	×
j Lease of facilities, equipment, or other assets to related organization(s),				=	×
• • • • • • • • • • • • • • • • • • •					,
k Lease of facilities, equipment, or other assets from related organization(s)			<u>:</u>	¥	‹ :
I Performance of services or membership or fundraising solicitations for related organization(s)			:	=	×
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s),			<u>- </u>	1m X	4
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				<u>-</u>	×
o Sharing of paid employees with related organization(s)			<u></u> : :	10 ×	
n Reimbijrsement paid to related organization(s) for expenses.					• •••
				19	×
				-	
r Other transfer of cash or property to related organization(s)			:	<u>-</u>	×
 Other transfer of cash or property from related organization(s 			:	1s	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	s line, including cove	ered relationships and transa	ction thresh	splo	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	(d) thod of determini amount involved	ĝu.
(1)					İ
(2)					
(3)					

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Schedule R (Form 990) 2018

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d) (e) (f) (f) (f) (f) (f) (g) (f) (g) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(b) Primary actwly	(c) Legal domicile (state or foreign	(d) Predominant income (related,	(e) Are all partners section	(f) Share of total income	(g) hare of d-of-year	(h) Disproportionale allocations?	() Code V · UBI amount in box 20	General or managing		(k) Percentage ownership
				organizations?		dosado	No.		parmed Ao C	N N	
(1)				2			2			2	
(2)											
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(5)											
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(16)											
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Schedule R (Form 990) 2018

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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions

RELATED ORGANIZATIONS

ALTHOUGH AOSI RETAINS NO FORMAL CONTROL OF THESE ENTITIES, THEY APPEAR ON THIS SCHEDULE R BECAUSE A MAJORITY OF THESE ENTITIES' DIRECTORS/TRUSTEES ARE DIRECTORS, TRUSTEES, OFFICERS, OR EMPLOYEES OF THE OPEN SOCIETY INSTITUTE.